

APPENDIX J. EXERCISE FEEDBACK FORM

Each group leader should complete and submit an exercise feedback form. Here are several options for submittal:

- Fill out the form below, and either bring your completed form to the Exercise Debriefing, email to vmata@sunnyvale.ca.gov, or mail to *Lt. V. Mata, Sunnyvale Dept. of Public Safety, Office of Emergency Services, 700 All America Way, Sunnyvale, CA 94088*
- Fill out the form online at OES.inSunnyvale.com

Please choose only one submittal method. You do not need to submit your form more than once.

Group/Individual Name: _____

Neighborhood Incident Command Post Address: _____
(If you don't have a Command Post yet, use the address where you gathered today.)

Total # of Participants at your Site during the Citywide Exercise: _____

of Participants SNAP-Trained: _____ (who have ever taken any SNAP class)

of Participants not SNAP-Trained: _____ (who have never taken any SNAP class)

of Participants who reached their Out-of-Area Contact: _____

of Participants who received a Nixle text message: _____

of Participants who heard the 1680 AM radio message: _____

Did you practice group radio procedures? YES NO Was it successful? YES NO

of scenario messages delivered: _____ to fire station # 1 2 3 4 5 6 7 (circle those used)

Did your group set up an Incident Command Post? YES NO

Did your group use ICS to organize your team? YES NO

How did you hear about this exercise?

Newspaper Website Neighborhood Group Other _____

WHAT WORKED WELL

WHAT NEEDS IMPROVEMENT

Exercise Feedback Form, Continued

LESSONS LEARNED

UNRESOLVED CONCERNS

RECOMMENDATIONS FOR NEXT YEAR'S SUNNYVALE'S EXERCISE PLANNING TEAM
